PLEASE PRINT

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

APR 30 2018

I. Name of Lobb	yist(s) <u>Susan S. Geiger</u>			NEW HAMPS
II. Name of lobb	yist's partnership, firm or	corporation, if any:		DEP* STRENT OF
Orr & Reno.	РА			
	(Name of partnership, firm or o	corporation)		
45 S. Main St	treet, P.O. Box 3550	Concord	NH	03302
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
(603) <u>224-238</u> (Telepho		(Fax)	e-mail <u>sgeiger@</u>	orr-reno.com
III. This stateme reportable expen	nt covers: (Choose one – fi se transactions which are	le separate reports i not attributable to a	for each client, OR you may my one client).	file a separate report for
All reportable	transactions occurring in th	e months prior to the	reporting date relative to the	following client:
	il Energy Supply Assoc (Full Name of Client as	ciation, Inc.) it appears on the Lobby	ist Registration Form)	
<u>OR</u>				
unrelated to any p		(including the lobbyi	st's family), or the lobbying	firm listed below which are
IV. Date of Repo	rt April 25, 2018 🔀 activity from date of registration	on to 3/31/18 a	July 25, 2018 activity from 4/1/18 to 6/30/18	
	October 31, 2018 activity from 7/1/18 to 9/3	0/18	January 30, 2019 \Box activity from 10/1/18 to 12/31/1	8
V. There have the state of this box is check Concord, NH 0336	ed, complete just this form t	d no reportable tra and submit it to the S	ansactions made since the ecretary of State's Office, Sta	e last report. Under the House, Room 204,
VI. Check if addi	tional reports are attached	1.		
	<u>-</u>		Addendum A – Fees and Exp	enses
	id an honorarium or reimbu		ust file Addendum B – Repo	
☐ If you, your fi	rm, or your family has made	e political contributio	ns, you must file Addendum	C- Political Contributions
I have read RSA 1	/Affirmation by Lobbyist 5, RSA 15-B, RSA 14-C an e best of my knowledge and		by swear or affirm that the fo	regoing information is true
(Signature of lobb	D By		04/25/18	
(Signature of lobb	yist)		(Date)	l
Susan S. Geig (Print Name of lo	erbbyist)			

P L E A S E P R

STATE OF NEW HAMPSHIRE **Lobbyists Fees and Expenses**

Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Susan S. Geiger		
II. Name of lobbyist's partnership, firm or corporation, if any:		
Orr & Reno, P.A. (Name of partnership, firm or corporation)		
III. Name of Client RESA (Retail Energy Supply Association, Inc.)	Date <u>04/2</u>	5/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The greduced by any expenses:	t relations, or pub	olic relations service
a) Total of all fees received in this reporting period	a) \$	0.00
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y		0.00
c) Total of all fees received to date (Add lines a and b)	c) \$	0.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office e individual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if experimate the aggregate total expenses; (b) the ale: meals purchases than \$10 that is end with a value of orting period of grue of greater than \$25, but received, expense reimbu	nditures are made by the lobbyist(s)/firm of all expenses paid aggregate total of all ed during a business is given to the persor \$25.00 or less); and reater than \$25.00 for a \$25, purchase of a not greater than \$50 rsement, or politica
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	50.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

d) Total expenses for this reporting period	d) \$	50.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	50.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from l period, including by whom paid or to whom charged.	obbying fees dur	ing this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foreg	going information
0- 0 M -	04/25/18	
(Signature of lobbyist)	(Date	
Susan S. Geiger		
(Print Name of lobbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Statement/Af	firmation	by Lobbyist
Statem	ent of Income	and Exp	enses for:

Name of Lobbying partnership, firm, or	corporation: _	Orr & Reno, P.	٩.
Name of Client (leave blank if Statemen	nt is for the par	tnership, firm, or	corporation and not related to a
particular client): <u>RESA (Retail Energy</u>	gy Supply As	ssociation, Inc.)	
Date of Report (check one):			
April 25, 2018 🗵 July 25, 2018	□ Octob	er 31, 2018 □	January 30, 2019 □
I have read RSA 15, RSA 15-B, RSA the following Addendums submitted w submitted):	664, the Staten vith that Staten	nent of Income an	d Expenses described above, a umber of Addendum forms be
1 Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the foregon complete to the best of my knowledge a		on on the Statemer	nt and each Addendum is true a
A 1 12-		(04/25/18
(Signature of lobbyist)			(Date)
Susan S. Geiger			
(Print Name of lobbyist)			